Summary

Pathway from the past. An institutional analysis of the implementation of the Social Support Act

This dissertation discusses two fundamental topics, addressed in the main research question: ‘Which changes in municipal policy, governance and the provision of social care result from the Social Support Act, and how can these changes be explained from an institutionalist perspective?’ First, the mentioned Act symbolizes a fundamental paradigm shift. It aims at the self-reliance of citizens with disabilities rather than only defining regulations for sufficient care provision, while also aiming to encourage a culture of social cohesion and active citizenship at the local level. This shift and the consequences thereof are clarified in the dissertation through a literature review and an in-depth case study of local governance arrangements, policies and provisions regarding social care. The second leading topic in this dissertation concerns explaining the diagnosed changes after the implementation of the Social Support Act from an institutionalist perspective. The basic idea of the institutionalist literature is that institutions work to promote stability and order, while change asks for dynamic adaptability. The concept of ‘institutional change’ therefore contains a paradox. However, municipalities appear to connect national initiatives with familiar norms and traditions at the local level. In making such connections, ideas turn out to be crucial. They are fluid and can either be narrowed down or stretched to conjoin the ‘old’ and ‘new’ welfare paradigm. Municipalities draw such ideas from early local traditions in care and welfare, and consequently add a coulure locale to their regulations. This offers a challenging perspective for institutionalist theory as well as welfare state reform. In the following, I will expound this central argument with an outline of the research theme, the theoretical problem and the study’s main findings.
A paradigm shift from ‘caring’ to ‘enabling’

‘Caring’ is a fundamental pillar of the Dutch welfare state. After World War II, a comprehensive system was designed to support the elderly, chronically ill and people with physical or mental limitations. Together, this support can be labelled ‘social care’. As a result of large-scale structural developments like population ageing and individualization trends, the Dutch government is currently rethinking and restructuring its social policies. Like in other Western welfare states, the allocation of social rights and responsibilities is under critical reconsideration. Rather than approaching social care as a universal social right, state intervention is increasingly directed towards individual citizens, under clearly defined conditions. Also, governments try to foster the societal responsibility of private-sector organization and civil-society associations, aiming to transform the role of public-sector actors into moderators more than autonomous problem-solvers.

The enforcement of the Social Support Act (‘Wet maatschappelijke ondersteuning’ or Wmo) in 2007 is a case par excellence of the current reform initiatives. The Wmo proposes a far-reaching reform of social care provision, to be fine-tuned by the municipalities. The Wmo aims at the self-reliance of citizens with disabilities and aims to encourage a culture of social cohesion and active citizenship. In addition, the Act does not have the character of a ‘service law’ that defines a set of circumstances under which citizens are automatically entitled to certain government services. Rather, it introduces the idea of ‘compensation’ and stimulates municipalities to explore together with citizens how to enable a citizen’s independence and social participation. The introduction of the Social Support Act also marks a new stage in the ongoing process of decentralization in the Dutch political-administrative system. It covers nine broadly defined policy goals, and the Dutch municipalities are in charge of combining these into coherent local policies, to be developed and executed together with private organizations and citizens. The Act is the first in the Netherlands introducing a model of horizontal accountability that is not combined with any vertical accountability mechanism. Municipalities are required to ensure accountability by involving citizens and stakeholders in policy-making and policy evaluation, without being accountable to the national government for the executed social care policy.

The problem of institutional change

The challenge that the Wmo poses to municipalities is to craft new policy programs and tools of intervention in the social care domain, in a legal context that offers ample space to do so. At the same time, however, municipalities’ space to design new policies and practises is limited by the existing institutional structures of the welfare state. Successive regulations on social security and (national) welfare policies
have generated a path of vested interests and normative views on adequate social care. Politicians and professionals uphold taken-for-granted manners of dealing with welfare issues as well as of the involvement of stakeholders and citizens. Institutional structures help to come to grips with a new and indefinite policy project such as the implementation of the Wmo, but they also narrow down the space for designing substantially new arrangements. Accordingly, municipalities’ space to design new policies and practises is by no means a tabula rasa. Even when it is evident that continuing on the path of a ‘traditional’ welfare state – founded on claims and rights – is prohibitive, actors may opt for maintaining the status quo out of normative considerations. Ironically, adjustments of institutional structures are not achievable without the help of actors who act within those very structures. The object of change (that which has to be changed) and the subjects of change (those who must realize that change) are one. As a result, local policy actors need to build upon already existing agreements, traditions and tools that can be expected to act as a repertoire, while at the same time trying to make actors responsive to new ideas. From an institutionalist perspective, it is thus not only relevant to study which changes are caused by the implementation of the Wmo, but also to study how the Wmo is being shaped locally and modelled into renewed social care configurations. This puzzling question lies at the core of this PhD thesis.

Binding ideas

A recent discipline in the institutionalist literature argues that change occurs as a sequence of connections between new social demands and long-standing traditions, drawing attention to the role of ideas in understanding and explaining such connections. Ideas are fluid and therefore potential vehicles for connecting the ‘old’ and the ‘new’. More than strictly defined rules or fixed norms, ideas are flexible and can either be narrowed down or stretched. The ability to successfully frame policy alternatives can become a decisive aspect of the policy process. By constructing a social problem and framing a reform proposal as the continuation of a familiar and acknowledged tradition, framing activities may help to organize support even for radical change proposals, thereby avoiding that such proposals are perceived as unwanted welfare retrenchment. The notion that ‘prevention is better than cure’ for example, which can also be found in the Wmo, sheds a new light on welfare state arrangements without weakening the foundation of a solid ‘safety net’ for citizens who (temporarily) need professional help. However, the popularity of the ‘ideational perspective’ in the literature on institutional change draws attention to knowledge gaps. In particular, the interaction of institutions and ideas needs more study. Our understanding of institutional change would be enriched by a careful tracing of the mechanisms by which actors become responsive to new ideas and, consequently, start to alter their routines. This dissertation
contributes to filling this knowledge gap through a comprehensive analysis of the municipal elaboration of the Wmo. The implementation of the Act in this respect serves as an informative case, since the Wmo covers an innovative yet broadly-defined philosophy on active citizenship and the self-reliance of people with disabilities. The Wmo therefore potentially offers much room for interpretation and framing activities.

**An in-depth study of the local elaboration of the Wmo**

In order to disclose local Wmo-practices, this study takes a bird’s eye view on the implementation of the Act and subsequently presents the findings of an in-depth case study research. An evaluation study of the Wmo, prepared by the *Netherlands Institute for Social Research* (Sociaal en Cultureel Planbureau, SCP), offers rich empirical data for a general outline of Wmo-policies, governance schemes and social-care provision across Dutch municipalities. Noticeably, the introduction of the Wmo appears to trigger reflections about social care at the local level. Initially, many municipalities chose to merely maintain their existing social care programmes because of an experienced shortage of time and capacity. Yet in the course of time, municipalities turned to considering adjustments and introducing policies and instruments that reflect the idea of enabling citizens (rather than only caring for them) in order to maintain and enhance their independence and social participation. What institutional *traditions* mean for Wmo-practices and whether reform activities are substantial and path-breaking, however, remains an unanswered question. This crucial question for understanding processes of institutional change is tackled here through an in-depth case study that digs deeper into the local policy process itself and sketches emergent actions, transition points, and key actors.

The Dutch municipalities Almere, Dordrecht, and Enschede were selected as cases for the in-depth study. The three municipalities are all relatively large (more than 100,000 inhabitants) and belong to the 25 largest Dutch municipalities. They represent ‘maximum variation cases’ that show distinct local institutional characteristics within a shared national institutional context of social care policy. Almere is a so-called ‘planned city’, which was built from scratch after the impoldering of the *Zuiderzee* (*Southern Sea*). From 1975 onwards, politicians and professionals jointly experimented to create interdisciplinary cooperation in the field of welfare and care. In the following decennia, the population of Almere increased continuously and significantly. The organization of care and welfare was consequently scaled-up. The history of Dordrecht, the second case in this study, goes back a thousand years. Located between the (mostly) Protestant North and the Catholic South, a multitude of social organizations, related to diverse (religious) groups, were established. Nevertheless, the Dutch collectivization of welfare policy after World War II inevitably undermined civic welfare initiatives in Dordrecht. Finally, Enschede
flourished as a centre for the textile industry and was one of the breeding places of social democracy in the Netherlands. When the textile industry went down, considerable socioeconomic problems followed. The field of welfare and care has traditionally displayed a high level of inter-organizational collaboration in the Enschede area. Administrators concentrate their strengths on deploying their often scarce financial resources as intelligently as possible and to gain the attention of the national government.

The rediscovery of local welfare traditions

On the basis of the local historical analysis sketched above, differences can be expected in the municipal implementation of the Wmo. This study indeed shows that 'institutions matter'; local traditions did channel the local reception of the Wmo. How the broadly defined policy goals of the Wmo are being interpreted, appears to be in local institutional legacies. In Almere, the Act is translated as a stimulus to ensure that the elderly and disabled direct their own life as long as possible. Individual citizens are seen as the primary actors indicating which support is needed and how it should be organized. Compared with the other two municipalities, the Wmo is most clearly interpreted as an opportunity to increase clients’ freedom of choice in Almere. In this respect, the city revitalizes the pioneer mentality of the city’s earliest inhabitants. In Dordrecht, local government stresses that the Wmo appeals to the local community as a whole: state-aided services are seen as only a fraction of what social care is about. Government authorities, in turn, should first and foremost enable civil society to flourish. Local politicians and administrators lay the emphasis on building upon the heritage of community work, civil organizations, and welfare activities in neighbourhoods. In Enschede, finally, the announcement of the new Act is most noticeably interpreted as a call to sufficiently restructure the organization of social care provision. Local government emphasizes that the Wmo entails rules on public goods and ascribes new responsibilities to the municipality with respect to information and prevention. Underlying this reading are financial constraints as well as a local government tradition of social investment. Taken together, ideas about clients’ freedom of choice and self-determination (Almere), civil society (Dordrecht) and prevention (Enschede) serve as a cognitive filter that municipalities lay over the Wmo to give meaning to their new tasks.

A path from the past and a vision of the future

Municipalities rediscover the importance of local approaches to welfare, although not in a pre-welfare state sense. The study’s main finding is that institutions channelled, but did not lock-in, the local initiation of the new Wmo policy. Instead
of turning back time, the three municipalities tread their way towards post-welfare state arrangements. They indeed reform existing governance schemes and social care provision. Reflection on local traditions appears to be the core mechanism generating reform activities. The early local welfare traditions that administrators projected on the Wmo shed a reflective light on the drawbacks of existing packages of state-aided and collectively organized services. They offer an alternative perspective that creates scope for devising new governance schemes for the provision of social care. Looking at the provision of care from the tradition of (the private initiatives of) pioneers in Almere, for example, shows that the individual client has limited voice within bureaucratic and collectively organized welfare arrangements. Based on that realization, the Wmo becomes an attractive tool for local government to realize a paradigm shift. Alternatively, ideas on ‘civil society’ in Dordrecht divert attention to the latent potency of civic initiatives that could be undermined by collectively organized care arrangements. As such, ideas help to connect the innovative Wmo-paradigm with institutionalized welfare state routines and make reform possible.

Scholars of institutional change are right in adopting a critical attitude towards welfare reform proposals because reform agendas can easily end in empty rhetoric instead of substantial change. Therefore, I not only studied the development of local Wmo-philosophies in the present study, but also show how local actors connect such new philosophies with established organisations and procedures. Instead of trying to dismantle existing social care arrangements, local administrators add new instruments to existing arrangements. Most remarkably, a comprehensive assessment of citizens’ specific ‘fingerprints’ has been added to the system of social care provision. Rather than reacting upon a demand expressed by citizens, a public servant is expected to explore, together with the citizen, the exact reasons behind the experienced constraints to being self-sufficient or participating socially. It is only after this open conversation that a search for the most suitable type of support for compensating those needs and demands starts. The introduction of this instrument suggests that something new and meaningful is happening. Social service provision under the Wmo differs significantly from the collectively and bureaucratically organised social care provision of the past and indeed indicates a trend away from ‘caring’ and towards ‘enabling’ citizens with disabilities.

The rise of the welfare city

The clarification of demand, together with welfare programs on active citizenship, turned out to become a nationwide norm of adequate Wmo-practices. Dutch municipalities, however, leave their own mark on the way these tools are applied. The local government in Almere, for example, worked out the instrument of demand clarification as a digital questionnaire that could be completed by citizens
individually, while Enschede has clients’ demands clarified by professional case-workers at the municipal care counter. These local features reflect the unique institutional traditions that define local action. Once again, two separate spheres (national and local) are actively connected. Interestingly, the shaping of those connections is not a (party-) political process in the first place. Politics is not fully absent – the Wmo attracts the attention of local politicians and a broad political consensus has emerged on the importance of reform – but political visions of the future (local) welfare state appear to be too broad to serve as guiding ‘route maps’. Instead, local officials stand at the centre stage during the elaboration of the Wmo. They act as the ‘linking pin’ connecting a multitude of professional groups, achieving a balancing act between local issues, the wider national political culture, and legal and financial restrictions. To give meaning to this process, I use the term localisation instead of decentralisation, which emphasizes the importance of local knowledge and experience together with sensitivity for local institutions and bonding capacity beyond formal statutory reform activities.

Although it would be highly premature to announce the birth of the welfare city (as a substitute of the welfare state), this study provides some clues that local welfare practises have come to bloom. The enforcement of the Wmo noticeably took place within a local framework of local traditions and issues, and national welfare programs are being enhanced with local layers of activation policies. Upcoming new decentralisation rounds and the further transfer of financial responsibilities to the local level increase the space for local actors to craft local policy practises. Enduring uncertainties about the juridical and financial scope of new decentred laws, however, also push municipalities towards learning from the examples of other municipalities and national formats. Hence, truly local Wmo-practices can only flourish with space and support for local welfare experiments being provided nationally. This study shows that institutional reforms acquire a recognizable and attractive character through local experiments. In this respect, the localization of social policy has a future, not only as an end in itself but also as a means towards facilitating welfare state reform.